

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000006557

**Entity Name:** WESLEY UNITED METHODIST CHURCH OF GAINESVILLE,  
INCORPORATED

**FILED**  
**Apr 02, 2019**  
**Secretary of State**  
**2468587594CC**

**Current Principal Place of Business:**

826 NW 23RD AVENUE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

826 NW 23RD AVENUE  
GAINESVILLE, FL 32609

**FEI Number: 59-1474155**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MANASCO, RAYMOND O  
2071 NW 21ST LANE  
GAINESVILLE, FL 32605-3964 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN OF TRUSTEES  
Name CASE, RONALD  
Address 1917 NW 102ND PLACE  
City-State-Zip: GAINESVILLE FL 32609

Title CHAIRMAN OF CHURCH COUNCIL  
Name SLAYDON, NANCY  
Address 3320 NW 2ND STREET  
City-State-Zip: GAINESVILLE FL 32609

Title CO-TRUSTEE  
Name HOLMES, CINDY  
Address 1423 NW 11TH ROAD  
City-State-Zip: GAINESVILLE FL 32605

Title TREASURER  
Name ADAMS, SHERRY  
Address 3727 SW 80TH DRIVE  
City-State-Zip: GAINESVILLE FL 32608

Title FINANCIAL SECRETARY  
Name MANCHE, TERRI  
Address 2419 NE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32609

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TERRI MANCHE**

**FINANCIAL SECRETARY**

**04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date